

POSITION	INITIALS	ID NO. —	DATE
FEE DETERMINATION	DT		9-11-00
O.I.P.E. CLASSIFIER		48	9/15/00
FORMALITY REVIEW	N-P	56855	10-17-00
RESPONSE FORMALITY REVIEW	A-M	56 580	12-18-00

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	11-18-00
2	11-18-00
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Claim	Date
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If more than 150 claims or 10 actions  
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